

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 5
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) SUPPORT AMERICA'S POLICE PAC		FEC IDENTIFICATION NUMBER ▼ C C00773390	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 01 / 01 / 1900	

Full Name of Payee Cloud Data Services		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 18 / 2021	
Mailing Address 1350 W SOUTHPORT ROAD BOX 130		Amount 4071.15	
City INDIANAPOLIS	State IN	Zip Code 46217	Transaction ID : SE-S433284
Purpose of Expenditure Leads / Phone Lists(Estimate)		Category/Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Name of Federal Candidate Spanberger, Abigail, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		433312.41	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Cloud Data Services		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 18 / 2021	
Mailing Address 1350 W SOUTHPORT ROAD BOX 130		Amount 4071.14	
City INDIANAPOLIS	State IN	Zip Code 46217	Transaction ID : SE-S433286
Purpose of Expenditure Leads / Phone Lists(Estimate)		Category/Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Name of Federal Candidate Rutherford, John, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		433311.85	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	8142.29
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CAPPLEMAN, OLIVER, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
12 / 02 / 2021

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 2 OF 5
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) SUPPORT AMERICA'S POLICE PAC		FEC IDENTIFICATION NUMBER ▼ C C00773390	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y 01 / 01 / 1900</div>	

Full Name of Payee EYP Consultants LLC		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y 11 / 18 / 2021</div>	
Mailing Address 2949 NW 120th Way		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">508.90</div>	
City Sunrise	State FL	Zip Code 33323	Transaction ID : SE-S433292
Purpose of Expenditure PAYMENT PROCESSING(Estimate)		Category/ Type 004	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div>
Name of Federal Candidate Spanberger, Abigail, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee EYP Consultants LLC		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y 11 / 18 / 2021</div>	
Mailing Address 2949 NW 120th Way		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">508.89</div>	
City Sunrise	State FL	Zip Code 33323	Transaction ID : SE-S433294
Purpose of Expenditure PAYMENT PROCESSING(Estimate)		Category/ Type 004	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div>
Name of Federal Candidate Rutherford, John, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">1017.79</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CAPPLEMAN, OLIVER, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
12 / 02 / 2021

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 3 OF 5
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) SUPPORT AMERICA'S POLICE PAC		FEC IDENTIFICATION NUMBER ▼ C C00773390	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 01 / 01 / 1900	

Full Name of Payee LAV Services LLC		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 18 / 2021	
Mailing Address 3468 Ruth Dr		Amount 1017.79	
City Las Vegas	State NV	Zip Code 89121	Transaction ID : SE-S433296
Purpose of Expenditure Phonebank Payroll Services(Estimate)		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Name of Federal Candidate Spanberger, Abigail, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
		433312.41	

Full Name of Payee LAV Services LLC		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 18 / 2021	
Mailing Address 3468 Ruth Dr		Amount 1017.78	
City Las Vegas	State NV	Zip Code 89121	Transaction ID : SE-S433298
Purpose of Expenditure Phonebank Payroll Services(Estimate)		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Name of Federal Candidate Rutherford, John, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
		433311.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	2035.57
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CAPPLEMAN, OLIVER, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
12 / 02 / 2021

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 4 OF 5
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) SUPPORT AMERICA'S POLICE PAC		FEC IDENTIFICATION NUMBER ▼ C C00773390
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on
		MM / DD / YYYY 01 / 01 / 1900

Full Name of Payee Standard Data Services LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 18 / 2021
Mailing Address 513 Mill Ave SE Suite 206		Amount 2261.75
City New Philadelphia	State OH	Zip Code 44663
Purpose of Expenditure Caging and Database Services(Estimate)	Category/ Type 004	Transaction ID : SE-S433288 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Spanberger, Abigail, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶
		433312.41

Full Name of Payee Standard Data Services LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 18 / 2021
Mailing Address 513 Mill Ave SE Suite 206		Amount 2261.74
City New Philadelphia	State OH	Zip Code 44663
Purpose of Expenditure Caging and Database Services(Estimate)	Category/ Type 004	Transaction ID : SE-S433290 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Rutherford, John, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶
		433311.85

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	4523.49
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CAPPLEMAN, OLIVER, , ,

[Electronically Filed]

Date

MM / DD / YYYY
12 / 02 / 2021

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 5 OF 5
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) SUPPORT AMERICA'S POLICE PAC		FEC IDENTIFICATION NUMBER ▼ C C00773390	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 01 / 01 / 1900	

Full Name of Payee Wired4Data		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 18 / 2021	
Mailing Address 55 Lake Havasu Ave South F-677		Amount 2318.30	
City Lake Havasu City	State AZ	Zip Code 86403	Transaction ID : SE-S433300
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(Estimate)		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Name of Federal Candidate Spanberger, Abigail, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
		433312.41	

Full Name of Payee Wired4Data		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 18 / 2021	
Mailing Address 55 Lake Havasu Ave South F-677		Amount 2318.29	
City Lake Havasu City	State AZ	Zip Code 86403	Transaction ID : SE-S433302
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(Estimate)		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Name of Federal Candidate Rutherford, John, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
		433311.85	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	4636.59
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	20355.73

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CAPPLEMAN, OLIVER, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
12 / 02 / 2021

Signature